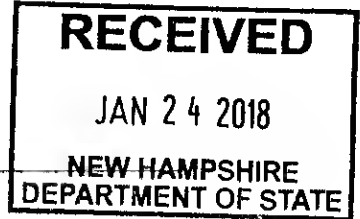




**STATE OF NEW HAMPSHIRE**  
**2017 Statement of Income and Expenses**  
**for LOBBYISTS**  
**(RSA Chapter 15)**

PLEASE PRINT



**I. Name of Lobbyist(s)** Leslie Wood

**II. Name of lobbyist's partnership, firm or corporation, if any:**

N/A

(Name of partnership, firm or corporation)

950 F Street, NW, Suite 300 Washington D.C. 20004  
 Business Address: (Street) (Town/City) (State) (Zip Code)  
(202) 835-3451 (202) 715-6987 e-mail lwood@phrma.org  
 (Telephone) (Fax)

**III. This statement covers: (Choose one – file separate reports for each client, OR you may file a separate report for reportable expense transactions which are not attributable to any one client).**

☒ All reportable transactions occurring in the months prior to the reporting date relative to the following client:

Pharmaceutical Research and Manufacturers Association of America (PhRMA)

(Full Name of Client as it appears on the Lobbyist Registration Form)

**OR**

☐ All reportable transactions by the lobbyist (including the lobbyist's family), or the lobbying firm listed below which are unrelated to any particular client.

**IV. Date of Report**

April 26, 2017 ☐

July 26, 2017 ☐

*Reports cover: activity from date of registration to 3/31/17*

*activity from 4/1/17 to 6/30/17*

October 25, 2017 ☐

January 31, 2018 ☒

*activity from 7/1/17 to 9/30/17*

*activity from 10/1/17 to 12/31/17*

**V. There have been no fees received and no reportable transactions made since the last report.** ☒

*If this box is checked, complete just this form and submit it to the Secretary of State's Office, State House, Room 204, Concord, NH 03301.*

**VI. Check if additional reports are attached:**

☐ If you have received fees or made expenditures, you must file **Addendum A– Fees and Expenses**

☐ If you have paid an honorarium or reimbursed expenses, you must file **Addendum B– Report of Honorariums or Expense Reimbursement**

☐ If you, your firm, or your family has made political contributions, you must file **Addendum C– Political Contributions**

**Sworn Statement/Affirmation by Lobbyist**

I have read RSA 15, RSA 15-B, RSA 14-C and RSA 664 and hereby swear or affirm that the foregoing information is true and complete to the best of my knowledge and belief.

Leslie Wood

(Signature of lobbyist)

1/23/18

(Date)

Leslie Wood

(Print Name of lobbyist)